PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application Filed: For:	December 19, 2006 INTERMEDIATE COMPOUND WHICH IS	Group No.: Examiner: USED FOR Issue Date:	1625 Binta M. Robinson THE PREPARATION
*NOTE:	Insert name(s) of inventor(s) and title also for patent Where fee payment, also insert application number and filing date,		
STAT	EMENT CLAIMING SMALL ENTITY STAT	US (37 CFR 1.	.9(c-f) and 1.27(b-d))
With re	espect to the invention described in [] the specification filed herewith. [X] application no. 10/555,659 , filed 12 [] patent no issued	/19/2006	
I.	IDENTIFICATION AND RIGHTS AS A SMA	ALL ENTITY	
I hereb	by state that I am (complete either (a), (b), (c) or (a	l) below)	
(a)	Independent Inventor [] a below named independent i independent inventor, as defined paying reduced fees under Section States Code, to the Patent and Tr	d in 37 CFR 1 ons 41(a) and (.9(c), for purposes of (b) of Title 35, United
(b)	Noninventor Supporting a Claim by Another [] making this statement to support		
Title 35 defined	mall entity status for purposes of paying reduced 5, United States Code. I hereby state that I would of in 37 CFR 1.9(c) for purposes of paying reduced 5, United States Code, if I had made the above iden	qualify as an in fees under Sec	dependent inventor as ctions 41(a) and (b) of
(c) [] [X]	Small Business Concern the owner of the small business concern identified an official of the small business concern empowe identified below:		ehalf of the concern

Address of ODESPÍ, BAN that the abo defined in reduced fees of employee For purpose average over part-time of concerns are	RCELONA, SPAIN ove identified small but 13 CFR 121.3-18, and is under Sections 41(a) are sof the concern, inclus of this statement, (1) or the previous fiscal year temporary basis during affiliates of each other ower to control the other statement.	CTUÓS GELABERT, 6-8: and siness concern qualifies as reproduced in 37 CFR 1 and (b) of Title 35, United S ding those of its affiliates, the number of employees ar of the concern of the per ng each of the pay period r when either, directly or in	E-08970, SANT JOAN a small business concern, as .9(d), for purposes of paying tates Code, in that the number does not exceed 500 persons. of the business concern is the sons employed on a full-time, is of the fiscal year, and (2) adirectly, one concern controls is controls or has the power to
(d) Non-Pro	ofit Organization an official empower identified below:	red to act on behalf of the no	onprofit organization
Name of Or Address of O			
[]		Institution of Higher Educa Internal Revenue Service C	
[]	States of America	or Educational Under Statu	
[]		ax Exempt Under Internal For It (a) (3)), if Located in the U	
[]		of America, if Located in the	ntional Under Statute of State ne United States of America))
defined in 3	nonprofit organization i 7 CFR 1.9(e), for purposited States Code.	dentified above qualifies as ses of paying reduced fees u	a nonprofit organization, as nder Sections 41(a) and (b) of
II. OW	NERSHIP OF INVEN	ITION BY DECLARANT	
	reby state that rights und the above identified	der contract or law remain w	rith and/or have been
[][(item (a) or (person (b) above)	[X] concern (item (c) above)	[] organization (item (d) above)

EXCEPT, that if the rights held are not exclusive, each individual, concern or organization having rights to the invention is listed below* and no rights to the invention are held (1) by any person who could not be classified as an independent inventor under 37 CFR 1.9(c) if that person had made the invention, (2) any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or (3) a nonprofit organization under 37 CFR 1.9(e).

		n person, concern, or organization concerns or organizations listed below*		
*NOTE:	E: Separate statements are required from each named person, concern or organization having rights to the invention as to their status as small entities. (37 CFR 1.27)			
Full Na				
Addres				
ORGAN	[] INDIVIDUAL IZATION	[] SMALL BUSINESS CONCERN	[] NONPROFIT	
Full Na	ıme			
Addres	s			
ORGAN	[] INDIVIDUA IZATION	L [] SMALL BUSINESS CONCERN	[] NONPROFIT	

III. ACKNOWLEDGEMENT OF DUTY TO NOTIFY PTO OF STATUS CHANGE

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b))

IV. DECLARATION

(check the following item, if desired)

- NOTE: The following verification statement need not be made in accordance with the rules published on October 10, 1997, 62 Fed. Reg. 52131, effective December 1, 1997.
- NOTE: "The presentation to the Office (whether by signing, filing, submitting, or later advocating) of any paper by a party, whether a practitioner or non-practitioner, constitutes a certification under § 10.18(b) of this chapter. Violations of § 10.18(b)(2) of this chapter by a party, whether a practitioner or non-practitioner, may result in the imposition of sanctions under § 10.18(c) of this chapter. Any practitioner violating § 10.18(b) may also be subject to disciplinary action. See §§ 10.18(d) and 10.23(c)(15)." 37 CFR 1.4(d)(2).
- [X] I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

\mathbf{V}_{\bullet}	SIGN.	ATUR	ES
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(complete only (e) or (f) below)

(e) NOTE: All inventors must sign the statement.		
Name of Inventor	-	
Signature of Inventor	Date:	
Name of Inventor	-	
Signature of Inventor	Date:	
Name of Inventor		
Signature of Inventor	Date:	
(add lines for any c	additional inventors who must sign)	
	or	
(f) NOTE: The title of the person signing on behalf	f of a concern or nonprofit organization should be specified.	
Name of Person SigningERVIN	VESZPRÉMI	
Title of Person CHIEF EXECUTIVE	VE OFFICER OF MEDICHEM, S.A.	
(if signing on behalf of a	- a concern or non-profit organization)	
Address of Person Signing FRUCT DESPÍ, BARCELONA, SPAK	VÓS GELABERT, 6-8; E-08970, SANT JOAN	
SIGNATURE A	DATE Nov. 23, 2007	